STATE OF UTAH DEPARTMENT OF NATURAL RESOURCES DIVISION OF OIL, GAS AND MINING						FORM 3 AMENDED REPORT			
APPLICATION FOR PERMIT TO DRILL						1. WELL NAME and NUMBER NBU 921-26F4DS			
2. TYPE OF WORK DRILL NEW WELL REENTER P&A WELL DEEPEN WELL					3. FIELD OR WILDCAT NATURAL BUTTES				
4. TYPE OF WELL Gas Well Coalbed Methane Well: NO						5. UNIT or COMMUNITIZATION AGREEMENT NAME NATURAL BUTTES			
6. NAME OF OPERATOR KERR-MCGEE OIL & GAS ONSHORE, L.P.						7. OPERATOR PHONE 307-752-1169			
8. ADDRESS OF OPERATOR P.O. Box 173779, Denver, CO, 80217						9. OPERATOR E-MAIL Laura.Gianakos@anadarko.com			
10. MINERAL LEASE NUMBER 11. MINERAL OWNERSHIP				12. SURFACE OWNERSHIP					
UO 01194 ST	FEDERAL INDIAN STATE FEE				FEDERAL INDIAN STATE FEE				
13. NAME OF SURFACE OWNER (if box 12 = 'fee')						14. SURFACE OWNER PHONE (if box 12 = 'fee')			
15. ADDRESS OF SURFACE OWNER (if box 12 = 'fee')						16. SURFACE OWNER E-MAIL (if box 12 = 'fee')			
17. INDIAN ALLOTTEE OR TRIBE NAME		18. INTEND TO COMMINGLE PRODUCTION FROM MULTIPLE FORMATIONS				19. SLANT			
(if box 12 = 'INDIAN')		YES (Submit Commingling Application) NO				VERTICAL DIRECTIONAL HORIZONTAL			
20. LOCATION OF WELL	F	OOTAGES	QTR-QTR	9	SECTION	TOWNSHIP	RANGE	MERIDIAN	
LOCATION AT SURFACE 2009 FS		FSL 1973 FWL	NESW		26	9.0 S	21.0 E	S	
Top of Uppermost Producing Zone 2367 F		FNL 2341 FWL	SENW		26	9.0 S	21.0 E	S	
At Total Depth 2367 FNI		FNL 2341 FWL	SENW		26	9.0 S	21.0 E	S	
21. COUNTY UINTAH 22. DISTANCE TO NEAREST 23									
25. DISTANCE TO NEARES (Applied For Drilling or Co				AME	POOL	26. PROPOSED DEPTH MD: 9932 TVD: 9795			
27. ELEVATION - GROUND LEVEL 4962	28. BOND NUMBER				29. SOURCE OF DRILLING WATER / WATER RIGHTS APPROVAL NUMBER IF APPLICABLE Permit #43-8496				
		Aī	TTACHMENTS						
VERIFY THE FOLLOWING	ARE ATTACI	HED IN ACCORCANG	CE WITH THE U	ГАН (OIL AND G	SAS CONSERVATI	ON GENERAL RU	JLES	
WELL PLAT OR MAP PREPARED BY LICENSED SURVEYOR OR ENGINEER				COMPLETE DRILLING PLAN					
AFFIDAVIT OF STATUS OF SURFACE OWNER AGREEMENT (IF FEE SURFACE)				FORM 5. IF OPERATOR IS OTHER THAN THE LEASE OWNER					
DRILLED)				TOPOGRAPHICAL MAP					
NAME Danielle Piernot	TITLE Regulatory Analys	E Regulatory Analyst PHONE			720 929-6156				
SIGNATURE DATE 04/01/20:		DATE 04/01/2010	EMAIL g			nbregulatory@anadarko.com			
APPROVAL APPROVAL									
	1	Permit Man	ager						

